

DEC 21 2004

DATE: December 21, 200413 pages, including cover page.TELECOPIER TRANSMITTAL SHEETTO: USPTO Attention: Examiner Agnes Beata RookeTELECOPIER TELEPHONE NUMBER: TO: (703) 872-9306FROM: Thomas Triolo TELEPHONE NO. (908) 298-2347**SCHERING-PLOUGH CORPORATION**

PATENT DEPARTMENT K-6-1, 1990

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UNITED STATES OF AMERICA

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In re Application of: Taremi, et al.

For Patent entitled: "Soluble, Stable Form of HDm2, Crystalline Forms Thereof and Methods of Use Thereof"

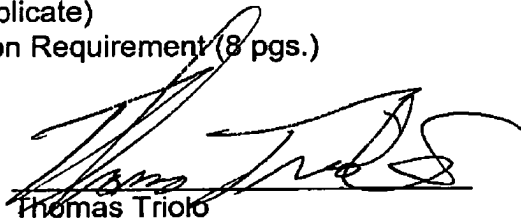
Filed: April 9, 2004

Attorney Docket No.: JB06017US01

Serial No.: 10/822,254

Transmitted herewith are:

- Fax Cover Sheet (1 pg.)
- Response Transmittal (1 pg.)
- Certificate of Fax Transmission (1 pg.)
- 1 Month Extension of time (1 pg., In Duplicate)
- Amendment and Response to Restriction Requirement (8 pgs.)



Thomas Triolo

Registration No. 48,001

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Attorney Docket No.: JB06017US01

Application No.: 10/822,254

Filing Date: April 9, 2004

First Named Inventor: Taremi, et al.

PTO/SB/97 (08-03)

Approved for use through 07/31/2006. OMB 0851-0031

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PTO/SB/21 (02-04)

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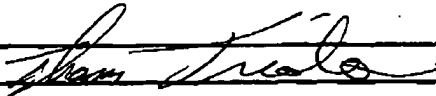
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/822,254	
	Filing Date	April 9, 2004	
	First Named Inventor	Taremi et al.	
	Art Unit	1653	
	Examiner Name	Agnes Beata Rooke	
Total Number of Pages in This Submission	13	Attorney Docket Number	JB06017US01

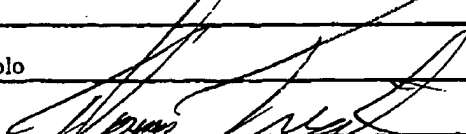
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<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Thomas Triolo, Reg. No. 48,001
Signature	
Date	December 21, 2004

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Date	December 21, 2004

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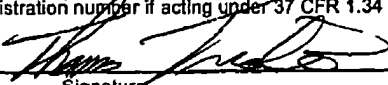
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <small>(Fees pursuant to the Consolidated Appropriations Act 2003 (H.R. 4818))</small>		Docket Number (optional) JB06017US01	
Application Number 10/822,254		Filed April 9, 2004	
For Soluble, Stable Form of HDm2, Crystalline Forms Thereof and Methods of Use Thereof			
Art Unit 1653		Examiner Agnes Beata Rooke	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>		
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120		\$ 120.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450		\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020		\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590		\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160		\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-0365</u> I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>48,001</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 Signature		<u>December 21, 2004</u> Date	
<u>Thomas Triolo</u> Typed or printed name		<u>908-298-2347</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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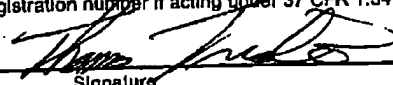
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FY 2005 (Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818))		JB06017US01
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<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1-27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-0365 I have enclosed a duplicate copy of this sheet.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 48,001 <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____		
Signature 		December 21, 2004 Date
Thomas Triolo Typed or printed name		908-298-2347 Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

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